		,	. ^		09	87	3 8	81.7	<i></i>				
J								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 ムプ のパマーク 337													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTITY	OR	OTHER		
TOTAL CLAIMS			19					RATE	FEE	1	RATE	FEE	
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FEI	355.00	OR	BASIC FEE	710.00	
TC	TAL CHARGE	1 9 minus 20= •		•			X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			7 minus 3 =		•			X40=	<del>                                     </del>	1	Y00		
MULTIPLE DEPENDENT CLAIM P			RESENT						├──	OR			
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=		OR			
								TOTAL		OR	TOTAL	710	
حصا	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS PROPERTY HIGHEST							SMALL	ENTITY	OR	OTHER SMALL		
AMENOMENT A	- Acres	REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 19	Minus	••		a		X\$ 9=		OR	X\$18=		
	Independent	· 2	Minus	•••		=		X40=		OR	X80=		
Ш.	FIRST PRESE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135=		OR	+270=		
							L	TOTAL	<u></u>	00	TOTAL		
(Column 1) (Column 2) (Column 3)								VDDIT. FEE		y • · · ·	ADDIT. FEE	<u> </u>	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	EST SER SUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF ML	Minus	***	GV A/DA	a		X40=		OR	X80=		
	ring i Prese	NIATION OF MI	LIPLE DEP	ENUENI	CLAIM			+135=		OR	+270=		
								TOTAL DOIT, FEE		OR ,	YOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
9 1		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	JER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		B		X\$ 9=		OR	X\$18=	ï	
	Independent	•	Minus	•••				X40=		Ì	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
* If the entry in column 1 is less than the entry in column 2, write 'V' in column 3.													
** {	f the "Highest Nur f the "Highest Nur	mber Previously Pa mber Previously Pa	id For in This id For in This	S SPACE IS S SPACE IS	less than	20, enter "20." 3, enter "3."	~	DOIT. FEE	·		LODIT. FEE		
1	ne wighest Num	ber Previously Paid	ror (Total or	ındepende	nų is the	nighest numbei	r ROUN	a in the app	ropriate box	tu cop	amn 1.		

FORM PTO-875 (Rev. 8/00)